CANCELLED %2

PROGRESS SHEET - APPLICATION FOR CHANGE ON:

######################################	777A-
NAME: HOSLYN, CITY OF CITY State PHONE: ADDRESS: ZOLS 15 BOLYNDRY UNA GROUP State ZIP PURPOSE OF APPLICATION: Pour Received Notices Provided Initial \$10.00 fee received: Provided Publication received: Provided Publication Initial \$10.00 fee received: Provided Publication Initial \$10.00 fee received: Provided Publication Initial \$10.00 fee received: Provided Initial \$10.	
City State ZIP PURPOSE OF APPLICATION: POUr RNEP Driginal Right Holder: Pay Marky BURKE Publication received: Was 200/ date Application received: Was 200/ date Publication received: Sent Received date Publication: Approved by: Date Notice Sent date Publication: Notice Sen	
City State ZIP PURPOSE OF APPLICATION: POUr RNEP Driginal Right Holder: Pay Marky BURKE Publication received: Was 200/ date Application received: Was 200/ date Publication received: Sent Received date Publication: Approved by: Date Notice Sent date Publication: Notice Sen	
Application received:	
Application received:	
Application received:	
Initial \$10.00 fee received:	0000
Statement of additional exam fee \$ Sent	
Statement of additional exam fee \$ Sent	10
PUBLICATION: Approved by: Date Date Dote Dote Dote Dote Dote Dote Dote Do	
PROTESTS: By: Name	-
CONSULTED AGENCIES: DOH DOW DOF USBR TRIBES date date date date date PROTESTS: By: date Name	
CONSULTED AGENCIES: DOH DOW date DOF USBR date TRIBES DOH date DOW date date date date date date PROTESTS: By: Name By: Name By: Name Checked by: P.P. time expires: date Report written by: Date Report Sent: COMMONOCOM	
Date received: Date received: Date received: Extensions: Date received: Extensions: Date received: Extensions: Date received: Extensions: Date received: Date received: Date received: Extensions: Date received: Da	
By:	
By:	
By:	
Affidavit received: Checked by: Checked by: Date Report Sent: Extensions: Date received: Extensions:	
Affidavit received: Checked by: Checked by: Checked by: Date Report Sent: Development Schedule Beginning of Construction: Extensions: Completion of Construction: Date sent: Extensions: Date received: Extensions:	
Affidavit received: Checked by: P.P. time expires: date O7-25-0) Report written by: Date Report Sent: DEVELOPMENT SCHEDULE Beginning of Construction: Extensions: Completion of Construction: Date sent: Extensions: Date received: Extensions: Date received: Extensions: Date received: Extensions: Date received: Extensions:	
Report written by: Date Report Sent: Description: Description: Date sent: Extensions: Date sent: Extensions: Date received: Extensions: Date received: Extensions: Date received: Date received: Extensions: Date received: Extensions: Date sent: Extensions: Date received:	
Report written by: Date Report Sent: Description: Description: Date sent: Extensions: Date sent: Extensions: Date received: Extensions: Date received: Extensions: Date received: Date received: Extensions: Date received: Extensions: Date sent: Extensions: Date received:	
Report written by: Date Report Sent: Date Report Sent: Description: Date sent: Extensions: Date received: Extensions:	
Beginning of Construction: Date sent: Extensions: Completion of Construction: Date sent: Extensions: Proof of Appropriation: Date sent: Extensions: Date received: Extensions: Date received: Extensions:	
Beginning of Construction: Date sent: Extensions: Completion of Construction: Date sent: Extensions: Proof of Appropriation: Date sent: Extensions: Date received: Extensions: Date received: Extensions:	0000
Extensions: Completion of Construction: Date sent: Extensions: Proof of Appropriation: Date sent: Extensions: Date received: Extensions:	
Completion of Construction: Date sent:	
Completion of Construction: Date sent:	
Proof of Appropriation: Date sent: Extensions: Date received: Date received:	
Proof of Appropriation: Date sent: Extensions: Date received:	
Extensions: Date well report(s) received:	
Date well report(s) received:	
Date well report(s) received:	
000000000000000000000000000000000000000	0000
DATE APPROVED FOR CHANGE: BY:	
() Superseding Permit	
() Superseding Certificate	
() Certificate of Change (on claims)	
Vol. 1-4, Page	
Date certificate fees requested: Date received:	
DATE CHANGE ISSUED:	
REMARKS: Drught permit assired 12-31-2001.	
REMARKS Bright permit aspired 12-31-2001. Change Carrellal 02-28-2002-52	
CHANGE PROGRESS	SSHF